ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AV)	4991M	9/20
O.I.P.E. CLASSIFIER		8	9-27-00
FORMALITY REVIEW	<u>-</u>		
RESPONSE FORMALITY REVIEW	0 %		
	SIS	59222	10-25-11

INDEX OF CLAIMS

•	Rejected	N	Non-elected
=	Allowed	1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

÷ Restricted 0 Objected .								
Claim 3	Date	Claim	Date	Claim	Date			
Finer Original		Final Original		Final Original				
2		51 52	+++++	101				
3 3 3		53	 	102	 			
4 1		54	+	104	+ + + + + + + + + + + + + + + + + +			
5 7 7		55		105	++++			
6 1 1		56		106	+ 			
7 1		57		107				
8 1		58		108				
9 / /		59		109				
10		60		110				
1077		61		111				
12		62		112				
13		63		113				
14		64		114				
		65		115				
16 7 7		66		116				
18 7		67	 	117				
19		68		118				
20		69		119				
1 11 /1 .1		70		120				
		71		121				
23 /		72 73		122	+			
(24 / /		74		123				
25 1	++++++	75			 			
26 /		76	 	125				
27 1		77	 	127				
20 /		78		128	 			
29 5		79		129	 			
30 / /		80		130	 			
31		81		131	 			
32		82		132				
33		83		133				
34		84		134				
35		85		135				
36		86		136				
37	+	87	+	137				
38	 	88		138				
39		89	 	139	 			
40	 	90		140				
41		91		141				
42		92		142				
43	 	93		143	 			
45	├┩╌┼╞ ╏ ┼┼┤	94 95	 - - - - - 	144	 			
46	├─┼─├─┼─┤	96	 - - - - 	145	 			
47		97	├─┼─ ┼─ ├ ─┼─┤	146	+-+-+			
48	┡┋	98	 	148	┼┼┼┼			
49		99	 - - - - - 	149	 			
50	 - - - - - - 	100	 	150	+++++			
		——————————————————————————————————————						

If more than 150 claims or 10 actions staple additional sheet here

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